

APPLICATION DATA SHEET**Application Information**

Application number::	To be assigned
Filing Date::	October 3, 2003
Application Type::	Continuation in part
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	No
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	Yes
Computer Readable Form (CRF)?::	Yes
Number of copies of CRF::	3
Title ::	METHODS AND NUCLEIC ACIDS FOR ANALYSES OF COLORECTAL CELL PROLIFERATIVE DISORDERS
Attorney Docket Number::	47675-51
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	51
Small Entity?::	Yes
Petition included?::	No
Petition Type::	
Licensed U.S. Gov't Agency::	No
Contract or Grant No::	None

Secrecy Order in Parent Appl.?:

No

First Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full capacity
Given Name::	Cathy
Middle Name::	
Family Name::	Lofton-Day
Name Suffix::	
City of Residence::	Brier
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	23908-35 th Ave. W.
City of mailing address::	Brier
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98036

Second Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full capacity
Given Name::	Fabian
Middle Name::	
Family Name::	Model
Name Suffix::	
City of Residence::	Seattle
State or Province of Residence::	WA

Country of Residence::	US
Street of mailing address::	734 Broadway Ave. E., Apt. 306
City of mailing address::	Seattle
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98102

Third Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full capacity
Given Name::	Andrew
Middle Name::	
Family Name::	Sledziewski
Name Suffix::	
City of Residence::	Shoreline
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	17736-15 th Ave. NW
City of mailing address::	Shoreline
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98177

Fourth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Tamas
Middle Name::	
Family Name::	Rujan
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	DE
Street of mailing address::	Vinetastr. 7
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	13189

Fifth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Jörn
Middle Name::	
Family Name::	Lewin
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	

Country of Residence:: DE
 Street of mailing address:: Lützowufer 24
 City of mailing address:: Berlin
 State or Province of mailing address::
 Country of mailing address:: DE
 Postal or Zip Code of mailing address:: 10787

Correspondence Information

Correspondence Customer Number:: **22504**
 Name:: Barry L. Davison
 Street of mailing address:: 1501 Fourth Avenue, Suite 2600
 City of mailing address:: Seattle
 State or Province of mailing address:: WA
 Country of mailing address:: US
 Postal or Zip Code of mailing address:: 98101-1688
 Phone number:: 206-628-7621
 Fax Number: 206-628-7699
 E-Mail address:: barrydavison@dwt.com

Representative Information

Representative Customer Number::		22504
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
	CIP	10/603,138	June 23, 2003

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	